



## Certificate of Completion



# Injury and Illness Prevention Webinar Attendance

The undersigned participant attended a training webinar for California State employees.

\_\_\_\_\_  
Name of Participant

\_\_\_\_\_  
Agency/Department

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
June 22, 2011

\_\_\_\_\_  
Date of Completion

A handwritten signature in blue ink, reading "Tom Rowe", written over a horizontal line.

Tom Rowe, President/CEO  
State Compensation Insurance Fund

A handwritten signature in blue ink, reading "Ronald Yank", written over a horizontal line.

Ronald Yank, Director  
Department of Personnel Administration

Please provide an e-copy of this completion certificate to your manager or supervisor and your Training Officer